

**THIS DECISION HAS BEEN APPEALED. THE
FOLLOWING IS THE RELATED SOAH DECISION NUMBER:**

SOAH DOCKET NO. 453-04-7045.M4

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on 5-1-03.

I. DISPUTE

Whether there should be reimbursement for CPT Code 97265, 99211 and 97139SS.

II. FINDINGS

The respondent denied reimbursement based upon "D - Duplicate." Original EOB was not submitted by either party; therefore, services will be reviewed in accordance with *Medical Fee Guideline*.

III. RATIONALE

| DOS | CPT CODE | Billed | Paid | EOB Denial Code | MARS (Maximum Allowable Reimbursement) | Reference | Rationale |
|---------|----------|---------|--------|-----------------|--|--|---|
| 8-26-02 | 97265 | \$43.00 | \$0.00 | D | \$43.00 | CPT Code descriptor | SOAP note supports delivery of service per MFG reimbursement of \$43.00 is recommended. |
| 8-26-02 | 99211 | \$18.00 | \$0.00 | | \$18.00 | CPT Code descriptor | SOAP note supports delivery of service per MFG reimbursement of \$18.00 is recommended. |
| 8-26-02 | 97139SS | \$35.00 | \$0.00 | | DOP | CPT Code descriptor Section 413.011(b) | Requestor did not support position that amount billed complied with Section 413.011(b); therefore, additional reimbursement is not due. |
| TOTAL | | | | | | | The requestor is entitled to reimbursement of \$61.00. |

IV. DECISION & ORDER

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor **is** entitled to reimbursement for CPT codes 97265 and 99211. Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Division hereby ORDERS the Respondent to remit **\$61.00** plus all accrued interest due at the time of payment to the Requestor within 20 days receipt of this Order.

The above Findings, Decision and Order are hereby issued this 18th day of February 2004.

Elizabeth Pickle
Medical Dispute Resolution Officer
Medical Review Division